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PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. **02-046**

First Inventor or Application Identifier **TORII**

Title **MOTOR HAVING ROTATIONAL SENSOR**

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. ☒ Specification [Total Pages **31**]

-Descriptive title of the Invention

-Cross Reference to Related Applications

-Background of the Invention

-Summary of the Invention

-Brief Description of the Drawings

-Detailed Description of the Preferred Embodiment
-Claims

-Abstract of the Disclosure

3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **7**]

4. Oath or Declaration [Total Sheets **4**]

a. ☒ Newly executed (original or copy)

b. ☐ Copy from a prior application (37 C.F.R. § 1.63 (d))
(for continuation/divisional with Box 16 completed)

i. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY
FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT
IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)

5. ☐ Microfiche Computer Program (Appendix)

6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

a. ☐ Computer Readable Copy

b. ☐ Paper Copy (identical to computer copy)

c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☒ Assignment Papers (cover sheet & document(s))

8. ☐ 37 C.F.R. § 3.73(b)
Statement (when there is an assignee) ☒ Power of
Attorney

9. ☐ English Translation Document (if applicable)

10. ☐ Information Disclosure
Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations

11. ☐ Preliminary Amendment

12. ☒ Return Receipt Postcard (MPEP 503)
(should be specifically itemized)

13. ☐ *Small Entity
Statement(s) ☐ Statement filed in prior application,
(PTO/SB/09-12) Status still proper and desired

14. ☒ Certified Copy of Priority Document(s)
(if foreign priority is claimed)

15. ☐ Other:

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

(Insert Customer Number or Attach bar code label
here)

or ☐ Correspondence address below

Name	23400			
PATENT TRADEMARK OFFICE				
Address				
City	State	Zip Code		
Country	Telephone	(202) 416-1638	Fax	(202) 416-1639

Name (Print/type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701
Signature	<i>David G. Posz</i>	Date	4.20.01

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DAVID G. POSZ
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WASHINGTON, D. C. 20036
—
SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

DAVID G. POSZ
KERRY S. CULPEPPER*
*ADMITTED IN VA ONLY

April 20, 2001

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Hon. Commissioner of Patents and Trademarks
Washington, D.C. 20231

Sir:

OIPE FILING CERTIFICATE

Applicant: TORII et al.

For: MOTOR HAVING ROTATIONAL SENSOR

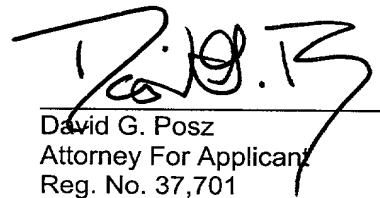
Docket: 02-046

Attorney: David G. Posz

Date of Deposit: April 20, 2001

I hereby certify that this certificate and the following documents are being hand delivered to, and deposited with, the USPTO at the Customer Service Window, Office of Initial Patent Examination, Crystal Plaza Building 2, Room 1B03, 2011 South Clark Place, Arlington, VA 22202 on the above-indicated date, and are addressed to the Commissioner of Patents and Trademarks/Assistant Commissioner for Patents, Washington, D.C., 20231:

- return receipt postcard;
- check for \$750 for filing fee and assignment recordation;
- transmittal form (2 copies);
- fee calculation form (2 copies);
- 31 page specification (8 numbered claims);
- 7 sheets of formal drawings;
- executed declaration and power of attorney;
- assignment and recordation cover sheet; and
- certified copy of priority document (JP 2000-134938).


David G. Posz
Attorney For Applicant
Reg. No. 37,701

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FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.

Complete if Known

Application Number _____

Filing Date **April 20, 2001**

First Named Inventor **TORIL et al.**

Examiner Name _____

Group/Art Unit _____

Attorney Docket No. **02-046**

TOTAL AMOUNT OF PAYMENT (\$)**750****METHOD OF PAYMENT (check one)**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **50-1147**Deposit Account Name **LAW OFFICE OF DAVID G. POSZ**
☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. ☒ Payment Enclosed:

☒ Check ☐ Money Order ☐ Other
FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	710
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$)**710****2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from Below	Fee Paid
8	-20**= 0	18	
1	-3**= 0	80	
Multiple Dependent			

**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)**0****FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**40****SUBMITTED BY**Name (Print/Type) **DAVID G. POSZ**Registration No. (Attorney/Agent) **37,701****Complete (if applicable)**Telephone **(202) 416-1638**Signature Date **4-20-01**

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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